PTC/SB/21 (12/97)
Approved for use through 9/30/2000. OMB 0681-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERC. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control numb								
	Application Number	08/939.185						

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	08/939,185		
			Filing Date	September 29, 1997	
		First Named Inventor	Jean M. Goldschmid	it Iki	
		Group Art Unit	2773		
			Examiner Name	Chadwick A. Jackso	n
Total Number of P	ages In This Submissi	on 12	Attorney Docket Number	042390.P4500	·······
	ENCLO	SURES (chec	k all that apply)		
Fee Transmittal I	Form	Assignmen (for an App	t Papers lication)	After Allowance to Group	Communication
Fee Attact	hed	Drawing(s)		Appeal Commun of Appeals and is	ilcation to Board interferences
Amendment / Re	sponse	Licensing-r	elated Papers		ication to Group Brief, Reply Brief)
After Final Petition Ro and Accom		uting Ślip (PTO/SB/69) panying Petitlon	Proprietary Inform	mation .	
Extension of Time Request To Conver		a Application	Status Letter		
Express Abandonment Request		Power of A Change of	ttorney, Revocation Correspondence Address	Additional Enclos	
Information Discl	osure Statement	Terminal D	isclaimer		
Certified Copy of Priority Small Ent		Small Entity	y Statement		
Response to Mis Incomplete Appli	sing Parts/ cation	Request for	r Refund	<u> </u>	
Response to Missing Parts under 37 CFR 1.52 or 1.53		Remarks	<u> </u>	FFIOLA	1
1.52 or 1.59			U	FFICIA	L
	SIGNATURI	OF APPLICAN	IT, ATTORNEY, OR A	ENT	
Firm	Aloysius T.C. A	uYeung, Reg.	No. 35,432		
Individual name	Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP				
Signature Releast d. Dill 40,992 for Al Aviency					
Date	March 6, 2000)		•	
CERTIFICATE OF MAILING/TRANSMISSION					
I hereby certify that this correspondence is being transmitted via facsimile under 37 CFR §1.8 on:					
March 6, 2000					
Typed or printed name Heather Adamson					
Signature	AND FIT IN ON	(201 11 100.00	m / L	Date 03/06/00	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the tridindual case. Any comments on the smount of time you are required to complete this form should be sent to the Chief Information Officer, Patient and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patients, Washington, DC 20231.

Please type a plus sign (+) inside this box



PTC/AB/17 (8/93)
Approved for use through 09/30/2000. OMB 0851-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 1999 Patent fees are subject to annual revision. nall Entity payments must be supported by a small entity statement, herwise large entity (eas must be pall. See Forms PTO/Se/09-12. See 37 C.F.R \$5 1.27 and 1.28.		Complete If Known			
		Application Number	08/939,185		
		Filing Date	September 29, 1997		
		ent.	First Named Inventor	Jean M. Goldschmidt Iki	
		Examiner Name	Chadwick A. Jackson		
TOTAL AMOUNT OF PAYMENT	(\$)		Group/Art Unit	2773	
		0.00	Atlamey Occket Number	042390 P4500	

	Auditor Beautiful 1999	
METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)	
The Commissioner is hereby authorized to charge indicated fees to:	3. ADDITIONAL FEE	•
The Commissioner is hereby authorized to credit any over payments to:	100 100 100 100 100 100 100 100 100 100	Paid
Oeposit Account 02-2666	Code (5) Code (5)	
Number	105 130 205 65 Surcharge - late filling fee or oath 127 50 227 25 Surcharge - late provisional filling fee or	
Occurs Account Blakely, Sokoloff, Taylor & Zafman LLP	cover sheet. 139 130 139 130 Non-English specification	
144hild	147 2,520 147 2,520 For filling a request for reexamination	
Charge Any Additional Fees Required Under 37 CFR §§ 1.16,1.17, 1.16 and 1.20.	112 920* 112 920*Requesting publication of SIR prior to Examiner action	
2. Payment Enclosed: Check Money Other	113 1,840 113 1,840 Requesting publication of SIR after Examiner action	
Order Double	115 110 215 55 Extension for response within first month	
FEE CALCULATION	116 380 216 190 Extension for response within second month	
1. BASIC FILING FEE	117 870 217 435 Extension for response within third month	
Lenge Enday Small Enday	118 1,210 218 680 Extension for response within fourth month	
Fee Fee Fee Fee PeeDescription FeePaid	128 1,850 228 925 Extension for response within fifth month	
Code (5) Code (5) 101 690 201 345 Utility filing fee	119 300 219 150 Notice of Appeal	
106 310 206 155 Design filing fee	120 300 220 150 Filling a brief in support of an appeal	
107 480 207 240 Plant filing fee	121 260 221 130 Request for oral hearing	
108 690 208 345 Relssue filing fee	138 1,510 138 1510 Pelition to institute a public use proceeding	
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable	
SUBTOTAL (1) (\$)	141 1,210 241 605 Petition to revive - unintentional	
SUBTOTAL (1) (\$)	142 1,210 242 605 Utility Issue fee (or reissue)	
2. EXTRA CLAIM FEES Extra Feetrom	143 430 243 215 Design Issue fee	
Claims below Fee Paid	144 580 244 290 Plant Issue fee	
Total Claims 17 . 20 = X 18.00 = 0	122 130 122 130 Petitions to the Commissioner	
Independent 3 - 6 = X 78.00 =	123 50 123 50 Pelitions related to provisional applications	
Multiple Dependent	126 240 126 240 Submission of Information Disclosure Strint	
"or number previousty paid, if greater, For Relsaues, see below Large Britiny Small Britiny	581 40 581 40 Recording each patent assignment per property (times number of properties)	
Fee Fee Fee Fee Description Code (S) Code (S)	146 790 246 395 Filing a submission after final rejection (37 CFR 1.129(a))	
103 18 203 9 Claims in excess of 20	149 790 249 395 For each additional invention to be	·
102 78 202 39 Independent claims in excess of 3	examined (37 CFR 1.129(b))	
104 260 204 130 Multiple Dependent claim, if not paid	d Other fee (specify) Other fee (specify)	
109 78 209 39 "Reissue independent claims over original patent	Outer tee (specify)	
110 18 210 9 "Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2) (S) 0.00	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	
SUBMITTED BY	Complete (if applicable)	
Typed or Printed Name Aloysius T.C. AuYeung	Reg. Number 35,432	
Tilling trails	Denocit Account	

Signature

| Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signature | Signa

Trans express mail no.



Blakely Sokoloff Taylor@Zafman

A LIMITED LIABILITY PARTNERSHIP INCLUDING LAW CORPORATIONS

TELEPHONE (503) 684-6200 FACSIMILE (503) 684-3245 INTELLECTUAL PROPERTY LAW

SUITE 101 5285 S.W. MEADOWS ROAD LAKE OSWEGO, OR 97035-3327 OTHER OFFICES

AUSTIN, TX
COSTA MESA, CA
LOS ANGELES, CA
SUNNYVALE, CA
SAN DIEGO/LA JOLLA, CA
SEATTLE/KIRKLAND, WA
DENYER/EMGLEWOOD, CO

FACSIMILE TRANSMITTAL SHEET

DATE:

March 6, 2000

DELIVER TO:

Examiner Chadwick A. Jackson

ART UNIT: 2773

FAX NO.:

703-308-9051

FROM:

Aloysius T.C. AuYeung, Registration No. 35,432

OUR REF. NO.:

42390.P4500

NO. OF PAGES:

(including cover sheet)

OFFICIAL

APPLICANT:

Goldschmidt Iki et al.

APPLICATION NO.:

08/939,185

FILED:

September 29, 1997

FOR:

GRAPHICAL USER INTERFACE WITH MULTIMEDIA

IDENTIFIERS

REMARKS:

Attached is a Preliminary Amendment for the above-referenced patent

application.

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at the facsimile number indicated above on:

Date of Transmission: March 6, 2000

Name of Person Transmitting: Heather Adamson

Signature: Date: 3 (0 /)7

CONFIDENTIALITY NOTE: The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us immediately so that we can arrange for the retrieval of the original documents at no cost to you.

If you experience any difficulty in receiving the referenced pages, please call Heather at (503) 684-6200.